



STATE OF RHODE ISLAND  
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Division of Air and Hazardous Materials  
291 Promenade Street, Providence, RI 02908-5767

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) (401) 277-2797

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA ID No.

IAD000819110

Manifest

Document No.

Page 1

of 1

Information in the shaded areas is  
not required by Federal law, but  
may be required by state law

3. Generator's Name and Mailing Address

SQUARE D COMPANY  
3700 6TH ST SW  
CEDAR RAPIDS IA 52406

A. State Manifest Document Number

RI C 0026907

B. Generator/Site Address

4. Generator's Phone ( 319 ) 365-4631

5. Transporter 1 Company Name

ST. JOSEPH MOTOR

6. US EPA ID Number

PAD987358587

C. State Transporter ID/License Plate

RI-699

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone 800-221-2564

E. State Transporter ID/License Plate

9. Designated Facility Name and Site Address

TECHNIC, INC  
1 SPECTACLE ST  
C RANSTON, RI 02910

10. US EPA ID Number

RI D 001200252

F. Transporter's Phone

G. Facility Mailing Address

H. Facility's Phone 401-781-6100

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

a. RQ ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, NOS  
CLASS 9 PD III UN3082 (D011)  
(SILVER SOLUTION)

004 DM 0220 G

D011

b. RQ ENVIRONMENTALLY HAZARDOUS SUBSTANCE  
LIQUID, NOS CLASS 9 PD III UN3082 (D011)  
(SILVER SOLUTION)

003 DF 0165 G

D011

c.

d.



R00352706

RCRA RECORDS CENTER

J. Additional

a.

c.

d.

K. Handling Codes for Wastes Listed Above

Interim

Final

Interim

Final

a. 301 T24

c.

b.

d.

15. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO 319-365-4631

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; or, if I am a small quantity, I have made good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

RICHARD R. KELLY

Signature

Richard R. Kelly

Date

Month Day Year

06 03 94

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

ARLIE YARBROUGH

Signature

Archie Yarbrough

Date

Month Day Year

06 03 94

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

RCRA FILE COPY

IAD000819110

DOCUMENT # 53

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

William Potter

Signature

William Potter

Date

Month Day Year

06 03 94

# INSTRUCTIONS FOR COMPLETING THE UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

State and Federal regulations require Generators, transporters, and Treatment, Storage and Disposal Facilities (TSDF's) to use this form and, for interstate and intrastate shipments of hazardous wastes, incomplete, incorrect or illegible manifests are violations of the law and could subject you to civil or criminal liabilities as specified in Rhode Island Hazardous Waste Regulations.

The manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the generator for proper completion.) This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used if you press down HARD. Each of the 8 copies must be filed with the appropriate party as it is completed. Copy distribution is as follows:

**COPY 1: FACILITY MAILED TO DESTINATION STATE:** The original stays with the shipment from generation to completion by the TSDF. When the manifest is completed, the TSDF must mail this copy to the State where the facility is located.

**COPY 2: FACILITY MAILED TO GENERATOR STATE:** When the TSDF has completed his section of the manifest, he mails this copy to the State where the waste was generated.

**COPY 3: FACILITY MAILED TO GENERATOR:** When the TSDF has completed his section of the manifest, he mails this copy back to the Generator of the waste, who must retain it on-site for his records.

**COPY 4: FACILITY RETAINS:** When the TSDF has completed his section of the manifest, he keeps this copy for his records.

**COPY 5: TRANSPORTER RETAINS:** When the transporter has completed his section of the manifest and transferred the waste to the TSDF, he keeps this copy for his records.

**NOTE:** If a continuing transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

**COPY 6: GENERATOR MAILED TO DESTINATION STATE:** When the Generator has completed his section of the manifest and transferred his waste to the transporter, he mails this copy to the State where the designated facility (TSDF) is located.

**COPY 7: GENERATOR MAILED TO GENERATOR STATE:** When the generator has completed his section of the manifest and transferred his waste to the transporter, he mails this copy to the State where the waste was generated.

**COPY 8: GENERATOR RETAINS:** When the Generator has completed his section of the manifest and transferred his waste to the transporter, he keeps this copy for his records.

## GENERATOR SECTION

**Item 1: GENERATOR'S US EPA ID NO.-MANIFEST DOCUMENT NO.-**Enter the US EPA generator's 12 digit identification number. Then enter a unique 5 digit number you assign to this manifest. Use of serially increasing numbers (eg. 00001, 00002, etc.,) is recommended.

**Item 2: PAGE 1 OF \_\_\_\_-**Enter the total number of pages used to complete this manifest.

**\*Item A: STATE MANIFEST DOCUMENT NUMBER-**Number is preprinted.

**Item 3: GENERATOR'S NAME AND MAILING ADDRESS-**Enter the name (as notified to EPA) and mailing address of the Generator. This address should be the location that will manage the returned manifest forms. (However, a manifest copy must be kept at the actual site).

**Item 4: GENERATOR'S PHONE NUMBER-**Enter a telephone number with area code where an authorized agent of the Generator can be reached in an emergency.

**\*Item B: GENERATOR/SITE ADDRESS-**The State Generator ID is the street address of the Generator's pick-up location. If the mailing address and the street address are the same, enter "same" in this block.

**Item 5: TRANSPORTER 1 COMPANY NAME-**Enter the company name (as notified to EPA) of the first transporter who will transport the waste.

**Item 6: US EPA ID NUMBER-**Enter the US EPA 12 digit identification number of the first transporter identified in Item 5.

**\*Item C: STATE TRANSPORTER'S ID-**Enter the State of registration and the license plate number of the waste-carrying portion of the vehicle being used to make the pick-up. **NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN RHODE ISLAND MUST HAVE A VALID R.I. TRANSPORTER'S PERMIT.**

**\*Item D: TRANSPORTER'S PHONE-**Enter a telephone number with area code where an authorized agent of the transporter can be reached.

**Item 7: TRANSPORTER 2 COMPANY NAME-**If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste. If more than two transporters will be used, provide the same information as items 7 and 8 in box 19.

**Item 8: US EPA ID NUMBER-**If applicable, enter the US EPA 12 digit identification number of the transporter in Item 7.

**\*Item E: STATE TRANSPORTER'S ID-**If applicable, enter the second transporter's State of registration and license plate number for the waste carrying portion of the vehicle being used to make the pick-up.

**\*Item F: TRANSPORTER'S PHONE-**If applicable, enter the second transporter's telephone number with area code where an authorized agent of the transporter can be reached.

**Item 9: DESIGNATED FACILITY NAME AND SITE ADDRESS-**Enter the company name (as notified to EPA) of the TSDF designated to receive the waste listed on this manifest. The address must be the site address, which may differ from mailing address.

ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE

**Item 10: US EPA ID NUMBER-**Enter the US EPA 12 digit identification number of the designated TSDF listed in Item 9.

**\*Item G: FACILITY MAILING ADDRESS-**Enter the company mailing address, if different than site address in Item 9. If the mailing address and the site address are the same, enter "same" in this block.

**\*Item H: FACILITY PHONE-**Enter a telephone number with area code for the TSDF designated to receive the waste listed on the manifest.

**Item 11: US DOT DESCRIPTION-**All of the following must be entered: The correct US DOT (Dept. of Transportation) name for the waste as identified in 49 CFR Parts 171-177 (usually found in column 2 of section 172.101), the assigned DOT Hazard Class (usually in column 3) and the 4 digit UN/NA ID number (column 3A). (e.g.: Waste Acetone, Flammable liquid, UN 1090) US DOT requires the word "waste" before or in the shipping name for all hazardous waste. Use this manifest ONLY for the shipment of State or Federally regulated HAZARDOUS WASTE.

**Item 12: CONTAINERS (NO. & TYPE)-**Enter the number of containers for each waste and the appropriate abbreviations from Table I (below) for the type of container used:

TABLE I - CONTAINER TYPE

DM=Metal drums, barrels, kegs	DW=Wooden drums, barrels, kegs	DF=Fiberboard or plastic drums, barrels, kegs
TP=Tanks, portable	TT=Cargo tanks (tank trucks)	TC=Tank cars
DT=Dump truck	CY=Cylinders	CM=Metal boxes, cartons, cases (incl. roll-offs)
CW=Wooden boxes, cartons, cases	CF=Fiber or plastic boxes, cartons, cases	BA=Burlap, cloth, paper/plastic bags

**Item 13: TOTAL QUANTITY-**Enter the total quantity of waste described on each line.

**Item 14: UNIT (Wt./Vol.)-**Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described in each line. Do not use fractions.

TABLE II - UNITS OF MEASURE

G=Gallons (liquids only)	L=Liters (liquids only)	P=Pounds
T=Tons (2000 lbs.)	Y=Cubic Yards	K=Kilograms
M=Metric Tons (1000 kg)	N=Cubic Meters	

**\*Item I: WASTE NO.-**Enter the 4 digit EPA hazardous waste number as it appears in 40 CFR Part 261, Subparts C and D. If a non-RCRA State-regulated wastestream is being manifested, enter the State waste code here. If both the Destination and Generator States have assigned codes use the Destination State code. If there is no EPA/State code, enter "none". Do not leave blank.

**\*Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE-**Enter description (chemical names, constituent percentages, etc.) for any waste which has a US DOT shipping name ending in n.o.s., or which does not have a US DOT shipping name. If you entered a state designated waste code in Item I, provide description, or note any applicable EPA Hazard Codes [Ignitable (I), Corrosive (C), Reactive (R), EP Toxic (E), Acute Hazardous (H), or Toxic (T).] Enter the specific gravity. Any additional desired waste description may also be entered here.

**Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION-**Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility (TSDF) is designated, note it here. For international shipments, Generators must enter the point of departure (City and State) from the US through which the waste must travel before entering a foreign country. This space may also be used for emergency response telephone numbers, and other information the Generator wishes to include about the shipment.

**\*Item K: HANDLING CODES -**TSDF completes this section- see "Designated Facility Section". (below)

**Item 16: GENERATOR'S CERTIFICATION-**The Generator must read, sign (by hand) and date the certification (with date of transfer to transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate mode (eg. "and rail") in the space below.

## TRANSPORTER SECTION

**Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT-**Print or type the name of the person accepting the waste on behalf of the first Transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

**Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT-**If applicable, follow the instructions for Item 17 for Transporter 2.

## DESIGNATED FACILITY (TSDF) SECTION

**\*Item K: TO BE COMPLETED BY THE RECEIVING FACILITY:** If final disposition is to occur at your facility, enter the appropriate handling code from the list below for each waste listed on this manifest under "Final". If ultimate disposition will not occur at the facility listed on this manifest, enter the appropriate handling code from the list below under "Interim". Then enter the final handling method code which is intended for each waste listed on this manifest under the column entitled "Final".

TABLE III - PROCESS CODES / HANDLING METHODS

STORAGE: S01(Containers)	S02(Tank)	S03(Waste Pile)	S04(Surface Impoundment)	S05(Other-Specify)
TREATMENT: T01(Tank)	T02(Surface Imp.)	T03(Incinerator)	T04(Other - Must specify code from 40 CFR 265 App. 1)	
DISPOSAL: D80 (Underground Injection)	D81 (Landfill)	D82 (Land Treatment)	D83 (Ocean Disposal)	D84 (Surface Impoundment)
	D85 (Other - Specify)			

**Item 19: DISCREPANCY INDICATION SPACE-**The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. Any applicable Discrepancy or Exception reporting requirements must also be complied with. Federal and State regulations may vary.

**Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION-**Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) and entering the date of receipt. The signature of the authorized TSDF agent indicates acceptance of (except for items specified in Item 19) and agreement with statements on this manifest.

**\*NOTE: FOR INTERSTATE SHIPMENTS YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION AND GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K.**